

RCRA INSPECTION REPORT - INTERIM STATUS STANDARDS  
TREATMENT, STORAGE, AND DISPOSAL FACILITIES  
Form 4 - Chemical, Physical and Biological Treatment/Land Treatment

## I. General Information

(A) Facility Name: American Chemical Service  
(B) Street: 420 S. Colfax Ave  
(C) City: Thyrite (D) State: IL (E) Zip Code 96319  
(F) Phone: (219) 924-4370 (G) County: Lake

II. Chemical, Physical and Biological  
Treatment (Subpart Q)

	Yes	No	Not Inspected	See Remark Number
1. Is equipment used to treat only those wastes which will not cause leakage, corrosion, or premature failure?				
2. Is a continuously fed system equipped with a means of hazardous waste inflow stoppage or control (e.g., cut-off system)?				
3. Has the owner or operator addressed the waste analysis requirements of 265.402?				
4. Are inspection procedures followed according to 265.403?				
5. Are the special requirements fulfilled for ignitable or reactive wastes?				
6. Are incompatible wastes treated? (If yes, 265.17(b) applies.)				

EPA Region 5 Records Ctr.



267382

### III. Land Treatment (Subpart M)

	Yes	No	Not Inspected	See Remark Number
1. Is hazardous waste capable of biological or chemical degradation?				
2. Are run-off and run-on diverted from the facility or collected (Effective date: November 19, 1981)?				
3. Is waste analysis according to 265.273?				
4. If food chain crops are grown at the facility, has the owner or operator addressed the requirements of 265.276?				
5. Is an unsaturated zone monitoring plan designed and implemented to detect the vertical migration of hazardous waste and provide information on the background concentrations of the hazardous waste available?				
6. Does the unsaturated zone monitoring plan address the minimum information specified in 265.278?				
7. Are records kept regarding application dates and rates, quantities, and location of all hazardous waste placed in the facility?				
Are the special requirements fulfilled regarding land treatment of ignitable or reactive wastes?				
9. Are incompatible wastes land treated? (If yes, 265.17(b) applies.)				

RCRA INSPECTION REPORT - INTERIM STATUS STANDARDS  
TREATMENT, STORAGE, AND DISPOSAL FACILITIES  
Form 1 - General Facility Standards

I. General Information:

(A) Facility Name: American Chemical Service Inc.

(B) Street: 420 S. Colfax Ave

(C) City: Griffith (D) State: IN (E) Zip Code: 46319

(F) Phone: (219) 924-4370 (G) County: Lake

(H) Operator: James Tarpo

(I) Street: See above

(J) City: \_\_\_\_\_ (K) State: \_\_\_\_\_ (L) Zip Code: \_\_\_\_\_

(M) Phone: \_\_\_\_\_ (N) County: \_\_\_\_\_

(O) Owner: James Tarpo

(P) Street: see above

(Q) City: \_\_\_\_\_ (R) State: \_\_\_\_\_ (S) Zip Code: \_\_\_\_\_

(T) Phone: \_\_\_\_\_ (U) County: \_\_\_\_\_

(V) Type of Ownership: ☐ Federal ☐ Municipal ☒ Private  
☐ State ☐ County

(W) Date of Inspection: 12/4/80 (Q) Time of Inspection (From) 3 pm (To) 5:30 pm  
12/8/80 10am to 4:30 pm

(X) Weather Conditions: 12/4 ~40°F. Fair  
12/8 ~45°F. Rain

(Y) Person(s) Interviewed	Title	Telephone
<u>James Lupo</u>	<u>President</u>	<u>(219) 924-4370</u>
<u>Jim Murphy</u>	<u>Plant manager</u>	<u>(219) 924-4370</u>
(Z) Inspection Participants	Title	Telephone
<u>Richard Shandross</u>	<u>Environmental Engineer</u>	<u>(312) 886-6146</u>

## II. Description of Site Activity

- |  |  |
|--|--|
| (A) <input checked="" type="checkbox"/> Generator (Form 2)                                   | (B) <input type="checkbox"/> Transporter (Form 3)                  |
| (C) <input checked="" type="checkbox"/> Chemical, Physical and Biological Treatment (Form 4) | (D) <input checked="" type="checkbox"/> Storage (Form 5)           |
| (E) <input checked="" type="checkbox"/> Landfill (Form 6)                                    | (F) <input type="checkbox"/> Incineration (Form 7)                 |
| (G) <input type="checkbox"/> Land Treatment (Form 4)   | (H) <input checked="" type="checkbox"/> Thermal Treatment (Form 7) |
- (I) Comments: (C) & (H) apply to ~~set~~ reclaiming of wastes, but put in Part A.
- 
- 

Supplemental forms (Listed in Parathesis) must be completed for each activity inspected. Attach all Supplemental forms to this report.

	Yes	No	Not Inspected	See Remark Number
(J) Has this facility Submitted a Part A Permit Application?	<u>✓</u>	<u> </u>	<u> </u>	<u> </u>

# "1. GENERAL FACILITY STANDARD"

	Yes	No	Not Inspected	See Remark Number
(A) Has the Regional Administrator been notified regarding:				
1. Receipt of hazardous waste from a foreign source?	<u>          </u>	<u>  1  </u>	<u>  <del>NA</del> NA  </u>	<u>          </u>
2. Transfer of Ownership?	<u>          </u>	<u>          </u>	<u>  NA  </u>	<u>          </u>
(B) General Waste Analysis:				
1. Has the owner <sup>or</sup> operator obtained a detailed chemical and physical analysis of the waste?	<u>  ✓  </u>	<u>          </u>	<u>          </u>	<u>  11  </u>
Does the owner <sup>or</sup> operator have a detailed waste analysis plan on file at the facility?	<u>  ✓  </u>	<u>  ✓  </u>	<u>          </u>	<u>  11  </u>
3. Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?	<u>  ✓  </u>	<u>          </u>	<u>  <del>NA</del>  </u>	<u>  11  </u>
(C) Security - Do security measures include:				
1. 24-Hour Surveillance?	<u>          </u>	<u>  ✓  </u>	<u>          </u>	<u>  1  </u>
2. Artificial or Natural Barrier Around Facility?	<u>  ✓  </u>	<u>          </u>	<u>          </u>	<u>  1  </u>
Controlled Entry?	<u>          </u>	<u>  ✓  </u>	<u>          </u>	<u>  1  </u>
Danger Sign(s) at Entrance?	<u>  ✓  </u>	<u>          </u>	<u>          </u>	<u>  2  </u>
D) Do Owner <sup>or</sup> Operator Inspections Include:				
1. Records of Malfunctions?	<u>  <del>NA</del>✓  </u>	<u>          </u>	<u>          </u>	<u>  3  </u>
2. Records of Operator Error?	<u>  ✓  </u>	<u>          </u>	<u>          </u>	<u>  3  </u>
3. Records of Discharges?	<u>  ✓  </u>	<u>          </u>	<u>          </u>	<u>  3  </u>
4. Inspection Schedule?	<u>  ✓  </u>	<u>  <del>NA</del>  </u>	<u>          </u>	<u>          </u>
5. Safety, Emergency Equipment?	<u>  ✓  </u>	<u>          </u>	<u>          </u>	<u>  3  </u>
6. Security Devices?	<u>  ✓  </u>	<u>          </u>	<u>          </u>	<u>  3  </u>
7. Operating and Structural Devices?	<u>  ✓  </u>	<u>          </u>	<u>          </u>	<u>  3  </u>
8. Inspection Log?	<u>  ✓  </u>	<u>  <del>NA</del>  </u>	<u>          </u>	<u>  4  </u>

### III. GENERAL FACILITY STANDARDS - Continued

	Yes	No	Not Inspected	See Remark Number
(E) Do Personnel Training Records Include:				
1. Job Titles?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>5</u>
2. Description of Training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>5</u>
3. Records of Training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>5</u>
Is Personnel Training Completed within the Required Time Frame?	<input type="checkbox"/>	<input type="checkbox"/>	<u>NA</u>	<input type="checkbox"/>
(F) Are the Following Special Requirements for Ignitable, Reactive, or Incompatible Wastes Addressed?				
1. Special Handling?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>6</u>
2. No Smoking Signs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>6</u>
3. Separation and Confinement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>6</u>

### IV. PREPAREDNESS AND PREVENTION

(A) Maintenance and Operation of Facility:				
1. Is there any evidence of fire, Explosion, or release of hazardous waste or hazardous waste constituent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(B) Does the Facility have the Following Equipment:				
1. Alarm System?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>7</u>
2. Telephone or 2-Way Radios?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>7</u>
3. Portable fire extinguishers, fire control, spill control equipment and decontamination equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>7</u>

Indicate the volume of water and/or foam available for fire control:

Units: \_\_\_\_\_

	Yes	No	Not Inspected	See Remark Number
(C) Testing and Maintenance of Emergency Equipment:				
1. Has the Owner or Operator established Testing and Maintenance Procedures for Emergency Equipment?	<u>✓</u>	<u>      </u>	<u>      </u>	<u>8</u>
2. Is Emergency Equipment Maintained in Operable Conditions?	<u>✓</u>	<u>      </u>	<u>      </u>	<u>8</u>
(D) Has Owner <sup>or</sup> Operator Provided Immediate Access to Internal Alarms (if needed)?	<u>      </u>	<u>      </u>	<u>NA</u>	<u>9</u>
(E) Is there Adequate Aisle Space for Unobstructed Movement?	<u>✓</u>	<u>      </u>	<u>      </u>	<u>16</u>
(F) Are Arrangements with Local Authorities Included in the Operating Record?	<u>      </u>	<u>      </u>	<u>/</u>	<u>10</u>

#### VI. CONTINGENCY PLAN AND EMERGENCY PROCEDURES

(A) Does the Contingency Plan Contain the Following Information:

1. The actions facility personnel must take to comply with §264.51 and 265.56 in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control, and Counter-measures (SPCC) Plan, he needs only to amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this Part.)
2. Arrangements agreed to by Local police departments, fire departments hospitals, contractors, and State and local emergency response teams to coordinate emergency services pursuant to §264.37?

<u>/</u>	<u>      </u>	<u>      </u>	<u>13</u>
<u>✓</u>	<u>      </u>	<u>      </u>	<u>13, 10</u>

	Yes	No	Not Inspected	See Remark Number
3. Names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinators?	<u>✓</u>	<u>      </u>	<u>      </u>	<u>13</u>
4. A list of all emergency equipment at the facility which includes the location and physical description of each item on the list and a brief outline of its capabilities?	<u>✓</u>	<u>      </u>	<u>      </u>	<u>13</u>
5. An evacuation plan for facility personnel where there is a possibility that evacuation could be necessary? (This plan must describe signal(s) to be used to begin evacuation, evacuation routes, and alternate evacuation routes:)	<u><del>5</del></u>	<u>✓</u>	<u>      </u>	<u>13</u>
(B) Are copies of Contingency Plan Available at Site and local Emergency Organizations?	<u>✓</u>	<u>      </u>	<u>      </u>	<u>13</u>
(C) Emergency Coordinator				
1. Is the facility Emergency Coordinator identified?	<u>✓</u>	<u>      </u>	<u>      </u>	<u>13</u>
2. Is Coordinator Familiar with all aspects of site operation and emergency procedures?	<u>✓</u>	<u>      </u>	<u>      </u>	<u>      </u>
3. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?	<u>✓</u>	<u>      </u>	<u>      </u>	<u>      </u>
(D) Emergency Procedures				
If an Emergency Situation has occurred at this facility; has the Emergency Coordinator followed the Emergency procedures listed in 256.56?	<u>      </u>	<u>      </u>	<u>NA</u>	<u>      </u>

Wicko



# VII. MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING

	Yes	No	Not Inspected	See Remark Number
(A) Use of Manifest System				
1. Does the facility follow the procedures listed in §265.71 for processing each Manifest?	<u>✓</u>	<u>      </u>	<u>      </u>	<u>12</u>
2. Are records of past shipments retained for 3 years?	<u>      </u>	<u>      </u>	<u>NA</u>	<u>      </u>
(B) Does the owner or operator meet requirements regarding Manifest Discrepancies?	<u>      </u>	<u>      </u>	<u>✓</u>	<u>      </u>
(C) Operating Record				
Does the facility maintain an operating record at the site as required in §265.73?	<u>      </u>	<u>✓</u>	<u>      </u>	<u>14</u>
(D) Availability, Retention and Disposition of Records				
Are all records available at the site for inspection as required in §265.74?	<u>✓</u>	<u>      </u>	<u>      </u>	<u>      </u>

## VIII. CLOSURE AND POST CLOSURE

(A) Closure and Post Closure				
1. Closure Plan Available for Inspection by May 19, 1981?	<u>      </u>	<u>      </u>	<u>      </u>	<u>      </u>
2. Has this plan been submitted to the Regional Administrator?	<u>      </u>	<u>      </u>	<u>      </u>	<u>      </u>
3. Has Closure begun?	<u>      </u>	<u>      </u>	<u>      </u>	<u>      </u>
4. Is closure cost estimate available by May 19, 1981?	<u>      </u>	<u>      </u>	<u>      </u>	<u>      </u>
(B) Post Closure Care and Use of Property - Has the Owner/Operator supplied a Post Closure Monitoring Plan (by May 19, 1981)?	<u>      </u>	<u>      </u>	<u>      </u>	<u>      </u>

RemarksPage 1 of 5Remark #RemarkProducts.

Solvents  $\left. \begin{array}{l} 3.5 \text{ mg/y} \\ 1.5 \text{ mg/y} \end{array} \right\} 5.2 \text{ mgal/yr total in.}$

overWaste

thickened paint sl. 0.1 mgal/yr  $\rightarrow$  GLD, Gary, Jr

"aqueous" alcohols, etc. 0.1 mgal/yr  $\rightarrow$  Waste Mgmt, Ill.

Fuel goes to blast furnace. Blended with #6 first.

one furnace / 100,000 gal/day

(State knows)

1 Operate 24 hrs/day: Reclaim, Additives.

Fenced from road, part of one side.

People working in area. Entry is not monitored, and could be effected without being seen.

2

Some signs, at these locations

LOS

legend

OK.

treatment

distillation

pot stills - steam heated, water condensers

RemarksPage 2 of 5Remark #Remark

- 3 Constantly inspected for all types of malfunctions, errors, discharges.  
Defective equipment inned replaced. No written logs? Written logs <sup>shown</sup> on 12/8.
- 4 Records kept 3 yrs. Written on bottom of reclaiming operating sheets.  
Name of insp; not always. Repairs generally not doc'd.
- 5 Folder on each employee. Shows safety, attendance, work record.  
Accident record kept.  
  
In union agreement, general descriptions, job titles. Not specific to  
H/W duties. Nothing re training to be given for each job.  
Descriptions have skill, educ, etc in them.
- 6 Explosion proof equip electrical wire.  
"No smoking", "no open lights" signs.  
Keted for grounding (high water table, piping): tanks grounded  
Only areas where fork lift goes is outside areas.  
Smoking confined to certain areas. Special handling when welding
- 7 Intercom system throughout plant. Places where waste handled in close  
Supervision can be contacted 24 hrs/day, through keeper. <sup>proximity.</sup>  
Phones scattered throughout plant as well.
- Fire extinguishers located all over plant.  
Fire control equipment with well, feed & booster pumps. (Foam)  
Fire pond 100,000-200,000 gal water.  
Manual sprinkler system activated from outside of bldg, reclaim bldg.  
(dry for winter)

(cont)

RemarksRemark #Remark

7 (cont)  
Mobil spill equip & sand on-site. Independent contractor handles. Includes large equip. Have pumpage to pick up large qty. Decanting system for small amts. Residue loaded into disposal box, brought to GLD.

Decon.: remove ground, in all cases.  
Scraping of pads etc.

Safety suits. SCBA. Disinfect face unit.

↳ Disposable

8 Hoosier Fire inspects, tags.

9 Union says > 2 people on premises

Injuries, accidents: local clinic. Familiar with stored materials. Fire department knows where fire pond is, to use foam. More plans in works for further working together, eg drills.

"Don't have types of potential problems for police to get involved".

(Brush fires often in area)

Has arrangements with contractor.

Has SPCC plan.

no operating record per se

11 Had plan on Monday (return visit)  
~~elements missing~~: Comment cont'd on p. 4

RemarksPage 4 of 5Remark #Remark

12

✓cd for sign/date: OK.

11 (contd)

Following tests run:

Fuel: BTU/#  
 chloride  
 Reactivity / blendability

Dist: Dist range  
 Yield  
 Activity - 9% oxygenated mat'l  
 Spec. Gravity

never ✓ for sulfide  
 don't find in these matls.

incoming: paint  
 lacquer  
 ink  
 clean-up  
 chem. cov. {"some"}

never → seldom get sample results from gens.  
 gets info. on plant processes, matls. detailed.

13

Contingency plan

✓ Emerg. coord. X copies to agencies

✓ Name, address, phone

✓ ordering of 1°, 2°, etc.

✓ emerg equip list

✓ location

✓ description

✓ evacuation plan

✓ arrangements

✓ actions to comply with 265.51

✓ " " " " 265.56

✓ maintained at fac.

✓ amendment - (NA)

a. which agencies to be contacted?

"appropriate" OK - barely

b. General: copy from 265.56 with no detail  
 specific to site

Specific: not true for 265.56; 56(e)(i) (ie, OK)  
 ; 56(j)(i)

c. evacuation is for off-site  
 people in area only.

SEPOA

~~background~~

Interviewed name/title

Index:

Date 12/4/80RemarksPage 5 of 5Remark #Remark

14

Operating record

265.73(6)

(Q: anywhere have ~~where~~ what HW codes in every loc?)

1. In different places, i.e. manifest, shipment log. No Table 2 codes
2. no cross reference.
- 3.
- 4.
- 5.
- 6.
7. NA

15

Maintenance

4 maintenance people

Plan: march '80

16

Difficult to assess. No risk pan, but whole area can be probably handled by fire equipment.



RCRA INSPECTION REPORT - INTERIM STATUS STANDARDS  
SUPPLEMENTAL FORM 5 FOR STORAGE FACILITY INSPECTIONS

I. General Information

(A) Facility Name: American Chemical Service  
(B) Street: 420 S. Colfax Ave  
(C) City: Griffith (D) State: In (E) ZIP Code 46319  
(F) Date of Inspection: 12/4/80

II. Storage Facility Standards (Part 265)

A. Facilities which store containers of hazardous waste (Subpart I)

	YES	NO	NOT IN-SPECTED	REMARK #
1. Are containers in good condition?	✓			
2. Are containers compatible with waste in them?	✓			
3. Are containers stored closed?	✓			
4. Are containers managed to prevent leaks?	✓			
Are containers inspected weekly for leaks and defects?	✓			
6. Are ignitable & reactive wastes stored at least 15 meters (50 feet) from the facility property line?	✓			
7. Are incompatible wastes stored in separate containers? (If not, the provisions of 40 CFR 265.17(b) apply.)			NA	
8. Are containers of incompatible wastes separated or protected from each other physical barriers or sufficient distance?			NA	

B. Facilities which store hazardous waste in tanks (Subpart J)

1. Are tanks used to store only those wastes which will not cause corrosion, leakage or premature failure of the tank?	✓			
2. Do uncovered tanks have at least 60 cm (2 feet) of freeboard, or dikes or other containment structures?			NA	

Continued on next page

	YES	NO	NOT INSPECTED	REMARK #
3. Do continuous feed systems have a waste-feed cutoff?			NA	
4. Are waste analyses done before the tanks are used to store a substantially different waste than before?			NA	
5. Are required daily and weekly inspections done?	✓			
6. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)			NA	
7. Are incompatible wastes stored in separate tanks? (If not, the provisions of 40 CFR 265.17(b) apply.)			NA	

C. Facilities which store hazardous waste in surface impoundments (Subpart K)

1. Do surface impoundments have at least 60 cm (2 feet) of freeboard?				
2. Do earthen dikes have protective cover?				
3. Are waste analyses done when the impoundment is used to store a substantially different waste than before?				
4. Is the freeboard level inspected at least daily?				
5. Are the dikes inspected weekly for evidence of leaks or deterioration?				
6. Are reactive & ignitable wastes rendered non-reactive or non-ignitable before storage in a surface impoundment? (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)				
7. Are incompatible wastes stored in different impoundments? (If not, the provisions of 40 CFR 265.17(b) apply.)				

D. Facilities which store hazardous waste in waste piles (Subpart L)

1. Are waste piles covered or protected from the wind?				
2. Is each in-coming movement of waste analyzed before being added to the waste pile?				
3. Are leachate, run-off, and run-on controlled? (The effective date of this provision is Nov. 19, 1981.)				
4. Are reactive & ignitable wastes rendered non-reactive or non-ignitable before storage in a pile? (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)				

Continued on next page

	YES	NO	NOT INSPECTED	REMARK #
5. Are piles of reactive or ignitable waste protected?				
6. Are incompatible wastes stored in different piles? (If not, the provisions of 40 CFR 265.17(b) apply.)				
7. Are piles of incompatible waste protected by barriers or distance from other waste?				

FORM 7

RCRA INSPECTION REPORT-INTERIM STATUS STANDARDS  
SUPPLEMENTAL FORM FOR THERMAL TREATMENT (AND INCINERATORS)

I. General Information

(A) Facility Name: American Chemical Service  
 (B) Street: 420 S. Colfax St  
 (C) City: Griffith (D) State: IN (E) Zip Code: 46319  
 (F) Date of Inspection: 12/8/80

II. Determination of Steady State

A. Type of unit (i.e., type of incinerator or thermal treatment): \_\_\_\_\_

B. Components and steady state condition:

Component

\*\*\*\* Was this component at SS prior to adding waste?

	Yes	No	Not Inspected	See Remark #:
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____

III. Waste Analysis

A. Minimum requirements, for wastes not previously burned/treated.

1. Required analyses; has an analysis been performed for the following:

Yes No Not Inspected See Remark #:

a. Heating value

\_\_\_\_\_ ☒ \_\_\_\_\_

b. Halogen content

☒ ☒ \_\_\_\_\_

c. Sulfur content

\_\_\_\_\_ ☒ \_\_\_\_\_

2. Documented, written data may be substituted for analysis for these. Are either present for:

Yes      No      Not Inspected      See Remark #:

a. Lead?

\_\_\_\_\_ ✓ \_\_\_\_\_ \_\_\_\_\_ :

b. Mercury?

\_\_\_\_\_ ✓ \_\_\_\_\_ \_\_\_\_\_

3. Other parameters for which the waste is tested to enable owner or operator to establish steady state or determine the types of pollutants which may be emitted. (Note in Remarks any which you feel should be tested for.)

See Remark #:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

#### IV. Monitoring and Inspections

	Yes	No	Not Insp.	See Remark #:
A. Combustion/emission control instruments monitored at least every 15 minutes?	_____	_____	<u>NA</u>	_____
B. Steady state maintained or corrections attempted?	_____	_____	<u>NA</u>	_____
C. Stack plume observed at least hourly for normal color and opacity?	_____	_____	<u>NA</u>	_____
D. Did any stack observations made by owner or operator show a plume different than normal?*	_____	_____	<u>NA</u>	_____
E. If yes to D above, were corrections made to return emissions to normal appearance?*	_____	_____	<u>NA</u>	_____
F. Complete unit and associated equipment inspected daily for leaks, spills, and fugitive emissions?	<u>✓</u>	_____	_____	_____
G. Emergency shutdown controls, system alarms checked daily for proper operation?	_____	_____	<u>NA</u>	_____

\* Specify in Remarks for what period of time this was checked.

11/6/80

V. Open Burning

A. Only complete this part if the facility open burns hazardous waste.

- |  | Yes   | No    | Not<br>Inspected | See Remark #: |
|--|-------|-------|------------------|---------------|
| 1. Does this facility burn<br>only waste explosives?<br>(A <u>No</u> answer means <u>other</u><br>hazardous waste is open-<br>burned.)                                   | _____ | _____ | _____            | _____         |
| 2. If this facility open-<br>burns waste explosive,<br>does it burn the waste<br>at a distance greater<br>than or equal to the<br>minimum specified distance<br>(below)? | _____ | _____ | _____            | _____         |

Inspector(s): Richard B. Shandross 12/15/80 (Sign and Date)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pounds of waste explosives or propellants	Minimum distance from open burning or detonation to the property of others	
0 to 100.....	204 m	670 ft
101 to 1,000.....	380 m	1,250 ft
1,001 to 10,000.....	530 m	1,730 ft
10,001 to 30,000.....	690 m	2,260 ft

11/6/80